



C. Earl Hunter, Commissioner

Promoting and protecting the health of the public and the environment.

Request to Extend an OCRM Critical Area Permit

Name & Address: _____

Phone Number: _____

Permit Number: _____

Expires: _____

I wish to request a _____ year extension.

It is OCRM policy to extend permits a **maximum** of up to three years. The fee is \$25.00 for each transaction. Please submit your extension request a minimum of thirty days prior to expiration.

NOTE: Once a permit has expired, it cannot be extended.

Please submit this request to:

Charleston Office: SCDHEC-OCRM
1362 McMillan Ave, Suite 400
Charleston, SC 29405

Beaufort Office: SCDHEC-OCRM
104 Parker Drive
Beaufort, SC 29906

Myrtle Beach Office: SCDHEC-OCRM
927 Shine Ave
Myrtle Beach, SC 29557

3/2006